

SWIMMING POOL / SPA CONSTRUCTION FORMS Available in office For Commercial, Institutional, or Residential Projects

City of Carmel; Department of Community Services PERMIT #:

OWNER INFO: STREET ADDRESS: CITY: STATE: ZIP: PROJECT LOCATION INFO: PROJECT NAME: (If applicable) LOT # and SUBDIVISION NAME: (If applicable) ESTIMATED COST OF CONSTRUCTION: SQUARE FOOTAGE Including deck area: SUMP PUMP: SUMP PUMP: YES NO OF CONSTRUCTION: STATE: ZIP: ADDRESS OF CONSTRUCTION: SQUARE FOOTAGE Including deck area: SUMP PUMP: STATE: ZIP: STATE: ZIP: ADDRESS OF CONSTRUCTION: SQUARE FOOTAGE Including deck area: SUMP PUMP: STATE COMMERCIAL CLASS OF POOL DESIGN RELEASE # SCOPE(S) OF DESIGN RELEASE # POOL COVER: YES NO											
BULDER'S EMAIL ADDRESS: BEST METHOD OF CONTACT: PROPERTY OWNER INFO: ADDRESS OF CONSTRUCTION: INFO: BULDER'S GOOD STRUCTION: PROJECT LOCATION INFO: ADDRESS OF CONSTRUCTION: DESTIMATED COST OF CONSTRUCTION: FOR CONSTRUCTION: SQUARE FOOTAGE Induding deck area: Info CONSTRUCTION: INFO: SQUARE FOOTAGE Induding deck area: IF APPLICABLE: SUMP PUMP: YES NO POOL COLOR: SSOPE(S) OF POOL COLOR: SSOPE(S) OF POOL COLOR: SCOPE(S) OF POOL COLOR: SCOPE(S) OF POOL COLOR: STATE COMMERCIAL: SPECIAL FLOOD HAZARO AREA: YES NO SEPTIC SYSTEM: AUTO FILTER: YES NO SEPTIC SYSTEM: YES NO DIVING BOARD: YES NO INVESTMENT SHALL BE RESPONSIBLE FOR; NOTIFICATION SHALL BE RESPONSIBLE FOR SHALL BE RESPONSIBLE FOR SHALL BE RESPONSIBLE FOR SHAL		NAME:			PHONE:			FAX:			
PROPERTY OWNER INFO: STREET ADDRESS: CITY: STATE: ZIP: PROJECT LOCATION INFO: PROJECT ADDRESS OF CONSTRUCTION: LOT # and SUBDIVISION NAME: (If applicable) ESTIMATED COST PROJECT NAME: (If applicable) SUMP PUMP: SECTIAL FLOOD HAZARD AREA: PROJECT SUBDITION SOCIETION HERCIAL SCOPE(S) OF RELEASE: POOL COVER: YES NO POOL HEATED: GAS BLEECTRIC SLIDE: YES NO POOL HEATED: JES NO PO	KLCOKD.	STREET ADDRESS:		CITY:			STATE:	E: ZIP:			
OWNER INFO: STREET ADDRESS: CITY: STATE: ZIP: PROJECT LOCATION PROJECT NAME: (If applicable) LOT # and SUBDIVISION NAME: (If applicable) LOT # and SUBDIVISION NAME: (If applicable) ESTIMATED COST SQUARE FOOTAGE Including deck area: IR TYPE, INCURTED NAME: (If applicable) SOURCE TNAME: (If applicable) LOT # and SUBDIVISION NAME: (If applicable) SOURCE TNAME: (If applicable) LOT # and SUBDIVISION NAME: (If applicable) SOURCE TNAME: (If applicable) LOT # and SUBDIVISION NAME: (If applicable) SOURCE TNAME: (If applicable) SOURCE FOOTAGE Including deck area: IR E TYPE, INCURTED NAME: IR SOURCE NAME: IR SO		BUILDER'S EMAIL ADDRE	SS:			BES	T METHOD OF (CONTACT:			
INFO: STREET ADDRESS: CITY: STATE: ZIP: PROJECT LOCATION INFO: PROJECT NAME: (If applicable) Comment	PROPERTY	NAME:		PHONE:			FA	X:			
ADDRESS OF CONSTRUCTION: INFO: PROJECT NAME: (If applicable) LOT # and SUBDIVISION NAME: (If applicable)	OWNER INFO:	STREET ADDRESS:	C		CITY:			STATE:	ZIP:		
INFO: SQUARE FOOTAGE		ADDRESS OF CONSTRUC									
SQUARE FOOTAGE RE TYPE, FAPPLICABLE: SQUARE FOOTAGE Including deck area: If APPLICABLE: If COMMERCIAL. If COMMERCIAL: If COMMERCIAL: SCOPE(S) OF RELEASE: POOL COVER: YES NO NO If YES NO If HEATED: If APPLICABLE: YES NO If	PROJECT LOCATION	ADDRESS OF CONSTRUCTION:									
DE CONSTRUCTION: Including deck area: IF APPLICABLE: SUMP PUMP: IF YES	INFO:	PROJECT NAME: (If applicable)				LOT	# and SUBDIVI	SION NAME: (If a	applicable)		
SPECIAL FLOOD HAZARD AREA: SPECIAL FLOOD HAZARD AREA: STEEL NO STATE COMMERCIAL CLASS OF POOL IF COMMERCIAL: SCOPE(S) OF RELEASE: POOL COVER: YES NO SEPTIC SYSTEM: SEPTIC	ESTIMATED COST OF CONSTRUCTION							,	CABLE:	-	
DESIGN RELEASE # FF APPLICABLE: FF APPLICABLE: FF APPLICABLE: FF APPLICABLE: POOL COVER: YES NO		· · · · · · · · · · · · · · · · · · ·	POOL COLC	PR:					☐ YES	□ NO	
EF HEATED: GAS ELECTRIC SLIDE: YES NO DIVING BOARD: YES NO DIVI								POOL COVE	ER: □ YES	□N	
LBUILDERS WILL BE RESPONSIBLE FOR: Notification to pool owners that these inspections are to be made, and also will relate the various cable. Pool builders shall coordinate with owners for the inspector's access to site on days inspections are scheduled. Under the Carmel / Clay 2 nance, Chapter 29.0, Sec. 29.06.08: "Late Fees shall be assessed on missed inspections, including occupancy without a C/O". permit is valid only if construction commences within 180 days of the date of issuance of this permit and must be completed, having the ificate of Occupancy issued, within 18 months of the date of issuance. Class I Structure Permits are subject to the State of Indiana General inistrative Rules (GAR 675 IAC 12) regarding expiration time frames for beginning and completing construction. Leudersigned, agree that any construction, reconstruction, enlargement, relocation, or alteration of a structure, or any change in the use of land or structures ested by this application will comply with and conform to all applicable laws of the State of Indiana and the "Zoning Ordinance of Carmel Indiana — 1993" (Z-289) and the construction will comply with and conform to all applicable laws of the State of Indiana, and all Acts amendatory thereto. I further certify that only kitchen and floor drains are connected to the sanitary sewer. I further certify that the construction will not be used or occupied until a Certificate of Occupancy has been due to Community Services, Carmel, Indiana. To certify, under the penalties of Perjury (Indiana Code 35-44-2-1) that all of the information I have provided in this Application and other unentation is true and accurate to the best of my knowledge and phief, and that I have not knowingly or intentionally provided or omitted any mation that would tend to hide, obscure, or otherwise misless the Dept. of Community Services regarding the truth of the matters addressed. Printed Name Printed Name Permit FEE (Flat Rate + Sq. Ft. fee): 1st BONDING / GROUNDING PERMIT FEE: CERTIFICATE OF OCCUPA	AUTO FILTER:	Ţ YES □ NO	SEPTIC SYS	STEM: 🗅 Y	′ES □	NO	POOL HE	ATED:	YES 🗆 I	NO	
LBUILDERS WILL BE RESPONSIBLE FOR: Notification to pool owners that these inspections are to be made, and also will relate the various able. Pool builders shall coordinate with owners for the inspector's access to site on days inspections are scheduled. Under the Carmel / Clay 2 nance, Chapter 29.0, Sec. 29.06.08: "Late Fees shall be assessed on missed inspections, including occupancy without a C/O". permit is valid only if construction commences within 180 days of the date of issuance of this permit and must be completed, having the ifficate of Occupancy issued, within 18 months of the date of issuance. Class I Structure Permits are subject to the State of Indiana General inistrative Rules (GAR 675 IAC 12) regarding expiration time frames for beginning and completing construction. undersigned, agree that any construction, reconstruction, enlargement, relocation, or alteration of a structure, or any change in the use of land or structures seted by this application will comply with and conform to all applicable laws of the State of Indiana and the "Zoning Ordinance of Carmel Indiana – 1993" (Z-289) idments, adopted under authority of I.C. 36-7 et seq. General Assembly of the State of Indiana, and all Acts amendatory thereto. I further certify that only kitchen and loor drains are connected to the sanitary sewer. I further certify that the construction will not be used or occupied until a Certificate of Occupancy has been by the Department of Community Services, Carmel, Indiana. Department of Community Services, Carmel, Indiana. Department of Community Services regarding the truth of the matters addressed. Printed Name Date CE USE ONLY: ************************************	F HEATED:] GAS ☐ ELECTI	RIC SLIE	DE: YE	S D N	0	DIVING	BOARD:	☐ YES □	 □ NO	
rmation is true and accurate to the best of my knowledge and belief, and that I have not knowingly or intentionally provided or omitted any rmation that would tend to hide, obscure, or otherwise mislead the Dept. of Community Services regarding the truth of the matters addressed. Date Date	ninistrative Rules (C e undersigned, agree th ested by this application ndments, adopted unde , and floor drains are co	GAR 675 IAC 12) regard at any construction, reconn will comply with and core authority of I.C. 36-7 et connected to the sanitary seven	ing expiration struction, enlarg form to all appli seq, General Ass ver. I further ce	ement, relocation icable laws of the sembly of the Stat	or beginni n, or alterat State of Ind te of Indiana	ng and contion of a stru- iana and the	mpleting con cture, or any ch "Zoning Ordin ts amendatory t	struction. lange in the use of ance of Carmel I hereto. I further	of land or structi Indiana – 1993" r certify that onl	ures (Z-289) a ly kitchen	
CE USE ONLY: ************************************	mentation is true ar mation that would t	nd accurate to the best of tend to hide, obscure, or	f my knowledg	ge and belief, ar slead the Dept. o	nd that I h of Commu	ave not kn	owingly or in	tentionally pro	vided or omitt matters addre	ted any	
PERMIT FEE (Flat Rate + Sq. Ft. fee): 1st BONDING / GROUNDING 2nd BONDING / GROUNDING FINAL- BidgFINAL- FORESTRY PERMIT FEE (Flat Rate + Sq. Ft. fee): INSPECTION FEES:			******			****	*****				
PERMIT FEE (Flat Rate + Sq. Ft. fee): INSPECTION FEES: CERTIFICATE OF OCCUPANCY: TOTAL:											
2 nd BONDING / GROUNDING FINAL- Bidg FINAL- FORESTRY TOTAL:				PE	RMIT FEE	(Flat Rate	e + Sq. Ft. fe	e):		- 1	
FINAL- Bidg FINAL- FORESTRY	2 nd BONDIN	NG / GROUNDING		INS	SPECTION	FEES:					
FINAL – Carmel Fire Department TOTAL:	FINAL- Bldg	g FINAL- FOR	RESTRY			E OF OCC	UPANCY:				
	FINAL – Ca	rmel Fire Departme	nt	TC	TAL:						
				Fee	Received by					Date	